

Your doctor has recommended that you use Paradise Ultrasound. You may choose another provider but please discuss this with your doctor first.

ABDOMINAL
THYROID
RENAL
BREASTS
SCROTUM
PELVIS
NECK
SUBCUTANEOUS
MASS
DVT
ELASTOGRAPHY
MUSCULOSKELETAL

# **PATIENT DETAILS**

Name Date of Birth Address

Medicare No. Work Cover No.

DATING SCAN
NUCHAL
TRANSLUCENCY
12-16 SCAN
MORPHOLOGY SCAN
THIRD TRIMESTER
NIPT TEST
HOLTER
ECHOCARDIOGRAM

### **EXAMINATION REQUESTED**

**CLINICAL DETAILS** 

INTERVENTIONAL FINE NEEDLE ASPIRATION CORE BIOPSY STEROID INJECTION BLOOD PATCH DRAINAGE OF DEEP COLLECTIONS

# **REFERRED BY**

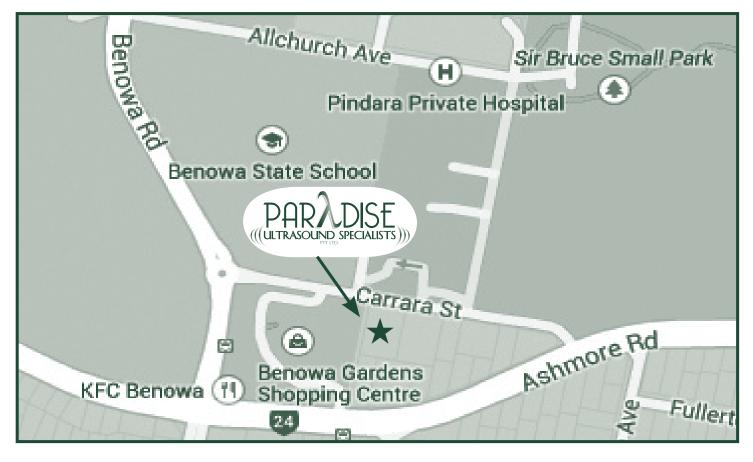
Contact details Provider Number

Signature:

Date:

Level 1, 18 Carrara Street, Benowa 4217 PH (07) 55 392 555 FAX (07) 55 393 388 WWW.PARADISEULTRASOUND.COM.AU

#### COMPREHENSIVE PATIENT INFORMATION IS AVAILABLE WITHIN OUR CENTRE



## PATIENT PREPARATION SUMMARY

The following are for adult studies. For children, or for patients who you may feel may not cope with the particular preparation, please contact our staff. For any particular diagnostic or clinical problem, please consult one of our radiologists.

If you have a history of significant allergic responses or diabetes, please tell our reception staff when making your appointment.

### ULTRASOUND

All general ultrasounds are bulk billed

**ABDOMEN:** Fast for six hours. Please do not smoke during this period. Take normal medications with a sip of water. (Note - no milk or soft drinks please).

**RENAL:** A full bladder will be required. Empty bladder one hour prior to your appointment time. Drink 500ml of clear fluid over the next half hour. Do not empty your bladder until after the ultrasound examination.

**PELVIS:** It is important that you have a full bladder at the time of the examination. Drink 1 litre of clear fluid one hour prior to the appointment time. Then do not empty your bladder until after the ultrasound examination. (Note: Male pelvis - drink 500mls only)

**OBSTETRIC ULTRASOUND:** A full bladder will be required. Empty bladder one hour prior to the appointment. Drink 500mls of clear fluid over the next half hour. For obstetric ultrasound greater than 20 weeks, a full bladder is not needed.

BREAST, THYROID ULTRASOUND, DUPLEX CAROTID, LEG VEINS FOR DVTS: No preparation required.

ABDOMINAL AORTA DOPPLER: Please fast for six hours prior to the examination, with no smoking during this time.